

SAEAMAN COL

GP 27648

9

PTO/SB/21 (12/97)

Approved for use through 9/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM			Application Number		7							
			Filing Date	December 28, 1998								
(to be used for all correspondence after initial filing)			First Named Inventor	Guy A. Story, Jr.								
			Group Art Unit	2764 27 AU				R H				
			Examiner Name	Retta, Y.				30				
Total Number of Pages in This Submission			Attorney Docket Number	002541.P009				3				
ENCLOSURES (check all that apply)												
Fee Transmittal F	Form	Assignmen (for an App			After Allowance to Group	. C∰n	nunicatio	on				
Fee Attach	ned	☐ Drawing(s)			Appeal Commu of Appeals and	nicatio Interfe	n to Boa rences	ard				
Amendment / Response		Licensing-related Papers			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief							
☐ After Final ☐ Affidavits/declaration(s)		Petition Routing Slip (PTO/SB/69) and Accompanying Petition			Proprietary Information							
Extension of Time Request		To Convert a Provisional Application			Status Letter							
Express Abandonment Request		Power of Attorney, Revocation Change of Correspondence Address			Additional Enclosure(s) (please identify below):							
Information Disclosure Statement		Terminal Disclaimer			- Return receip - Check for \$11		ard					
Certified Copy of Priority Document(s)		Small Entity	y Statement									
Response to Missing Parts/ Incomplete Application		Request for Refund						<u></u> ∐				
Response to Missing Parts under 37 CFR 1.52 or 1.53		Remarks										
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT												
Firm Paul A. Mendonsa, Reg. No. 42,879												
or Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP												
Signature A.M.												
Date July 25, 2000												
CERTIFICATE OF MAILING/TRANSMISSION												
Thereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: July 25, 2000												
Typed or printed name Mark W. Baugher												
Signature		1/1 /1-	✓// I _r) ata	07/25/00							

	C	.LE	\				
ease type a plus sign (+) inside this box +		•	닑		PTO/SB/17 (6/99) Approved for use through 09/30/2000. OMB 0651-0032		
. Under the Paperwork Reduction Acces 1995,	UL 3.	so1s20010gi	to re	espond to	Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE o a collection of information unless it displays a valid OMB control number.		
FEE TRANSMITTALE		1	W	70F -	Complete if Known		
f FM 4000	1	Applicati	pn Nui	mber	09/222,336		
for FY 1999 🛮 🍾	ADE!	Filipode	ate		December 28, 1998		
Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement.	سند	First Nar		ventor	,		
Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R §§ 1.27 and 1.28.	1	Examine	er Nam	e	Retta, Y.		
	-20	Group/A			2764		
TOTAL AMOUNT OF PAYMENT (\$) 110.	.00	Attorney	Docke	et Num	nber 002541.P009 N 70		
METHOD OF PAYMENT (check one)					E CALCULATION (continued)		
The Commissioner is hereby authorized to charge	3.	. ADI	DITION	AL FE	E 3 F Z		
indicated fees to:	Lar	3. ADDITIONAL FEE Large Entity Small Entity					
2. The Commissioner is hereby authorized to credit	Fee		Fee	Fee	Fee Description Fee Paid		
Deposit Deposit	Coc		Code		Surcharge - late filing fee or path		
Account Number 02-2666	10	5 130	205	65	curonal go late ining 100 of cath		
Deposit	12	27 50	227	25	Surcharge - late provisional filing fee or		
Account Blakely, Sokoloff, Taylor & Zafman LLP	13	9 130	139	130	cover sheet. Non-English specification		
Name Charge Any Additional Fees Required Under 37		7 2,520		2,520	For filing a request for reexamination		
CFR §§ 1.16,1.17, 1.18 and 1.20.	11:	•	112	920*	*Requesting publication of SIR prior to Examiner action		
2. Payment Enclosed:	11	3 1,840*	113	1,840*	*Requesting publication of SIR after		
Money ☐ Other ☐ Other	۱.,	- 445	~		Examiner action		
FEE CALCULATION	11		215		Extension for response within first month 110.00		
	110		216		Extension for response within second month		
BASIC FILING FEE Large Entity Small Entity	11		217		Extension for response within third month		
Fee Fee Fee Fee Description Fee Paid		8 1,210	218		Extension for response within fourth month		
Code (\$) Code (\$)	128 119	8 1,850 9 300	228 219		Extension for response within fifth month Notice of Appeal		
101 690 201 345 Utility filing fee	111		219		Filing a brief in support of an appeal		
106 310 206 155 Design filing fee	12		220		Request for oral hearing		
107 480 207 240 Plant filing fee		8 1,510			Petition to institute a public use proceeding		
108 690 208 345 Reissue filing fee	14		240		Petition to institute a public use proceeding Petition to revive - unavoidable		
114 150 214 75 Provisional filing fee		1 1,210	240		Petition to revive - unintentional		
SUBTOTAL (1) (\$)		1,210	241		Utility issue fee (or reissue)		
	14:	•	242		Design issue fee		
EXTRA CLAIM FEES Extra Fee from Claims below Fee Paid	14		244		Plant issue fee		
Total Claims = X=	12		122		Petitions to the Commissioner		
Independent X X	12		123		Petitions related to provisional applications		
Multiple Dependent	12		126		Submission of Information Disclosure Stmt		
**or number previously paid, if greater, For Reissues, see below Large Entity Small Entity	58		581	40	Recording each patent assignment per property (times number of properties)		
Fee Fee Fee Fee Description	14	6 790	246		Filing a submission after final rejection		
Code (\$) Code (\$)					(37 ČFR 1.129(a))		
103 18 203 9 Claims in excess of 20	14	9 790	249		For each additional invention to be		
102 78 202 39 Independent claims in excess of 3	1 _,h	foo (en	- ~ifi/\		examined (37 CFR 1.129(b))		
104 260 204 130 Multiple Dependent claim, if not paid		er fee (spe er fee (spe					
109 78 209 39 **Reissue independent claims over original patent		DI 102 (.,	, , ,	_			
110 18 210 9 **Reissue claims in excess of 20							
and over original patent	l						
SUBTOTAL (2)		educed by	Basic !	Filing I	Fee Paid SUBTOTAL (3) (\$) 110.00		

Complete (if applicable) Typed or Printed Name Paul A. Mendonsa 42,879 Reg. Number Deposit Account User ID 07/25/00 02-2666 Signature Date

SUBTOTAL (2)

SUBMITTED BY

(\$)

(\$)